

## APPLICATION DATA SHEET

### **Application Information**

Application Number::  
Filing Date::  
Application Type:: Regular  
Subject Matter:: Utility  
CD-ROM or CD-R?:: None  
Number of CD Disks:: 0  
Number of Copies of CDs:: 0  
Sequence Submission?:: No  
Computer Readable Form (CRF)?:: No  
Number of Copies of CRF:: 0  
Title:: ETCH STOP LAYER SYSTEM  
Attorney Docket Number:: ASC-022CPCN  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure:: 1  
Total Drawing Sheets:: 15  
Small Entity?:: No  
Licensed US Govt. Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: Kenneth  
Middle Name:: C.  
Family Name:: Wu  
Name Suffix::  
City of Residence:: San Francisco

State or Province of Residence:: CA  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 2095 California Street, #312  
City of Mailing Address:: San Francisco  
State or Province of Mailing Address:: CA  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 94109

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: Eugene  
Middle Name:: A.  
Family Name:: Fitzgerald  
Name Suffix::  
City of Residence:: Windham  
State or Province of Residence:: NH  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 7 Camelot Road  
City of Mailing Address:: Windham  
State or Province of Mailing Address:: NH  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 03087

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canadian  
Status:: Full Capacity  
Given Name:: Gianni  
Middle Name::  
Family Name:: Taraschi  
Name Suffix::  
City of Residence:: Andover  
State or Province of Residence:: MA

Country of Residence:: U.S.A.  
Street of Mailing Address:: 75 School Street, Apt. 2  
City of Mailing Address:: Andover  
State or Province of Mailing Address:: MA  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 01810

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: Jeffrey  
Middle Name:: T.  
Family Name:: Borenstein  
Name Suffix::  
City of Residence:: Holliston  
State or Province of Residence:: MA  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 936 Highland Street  
City of Mailing Address:: Holliston  
State or Province of Mailing Address:: MA  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 01746

**Correspondence Information**

Correspondence Customer Number:: 021323

**Representative Information**

Representative Customer Number:: 021323

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Continuation of	09/599,260	June 22, 2000
09/599,260	Continuation-in-Part of	09/289,514	April 9, 1999
09/289,514	Non-Provisional of	60/081,301	April 10, 1998

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
		MM/DD/YY	

**Assignee Information**

Assignee Name:: Massachusetts Institute of Technology  
City of Mailing Address:: Cambridge  
State or Province of Mailing Address:: MA  
Country of Mailing Address::